

400 Garden City Plaza, Suite 300
Garden City, New York 11530
(516) 742-4343 - Telephone
(516) 742-4366 - Facsimile
E-mail: introp@ssmp.com

**SCULLY, SCOTT, MURPHY
& PRESSER, P.C.****Fax****RECEIVED
CENTRAL FAX CENTER****MAY 22 2006**

To: Examiner Matthew John Kasztejna Art Unit: 3739	From: Thomas Spinelli, Esq. Registration No.: 39,533
Fax: 571-273-8300	Pages: 11
Phone: 571-272-6086	Date: May 22, 2006
Re: USSN: 10/690,404 Our Docket: 17136	CC:

☐ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Acknowledge**

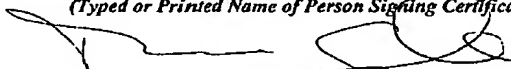
The following is being filed with the U.S. Patent and Trademark Office via facsimile on May 22, 2006:


1. Response Under 37 C.F.R. § 1.116 W/Transmittal in Duplicate
2. Authorization to Charge Deposit Account 19-1013
3. Certificate of Facsimile Transmission

Applicant: Hiroki Moriyama
Serial No.: 10/690,404
For: ENDOSCOPE
Filed: November 17, 2003
Docket: 17136
Dated: May 22, 2006
TS:cm


CONFIDENTIALITY: The documents accompanying this facsimile transmission may contain information which is either confidential or legally privileged and is intended only for the authorized use of the individual or entity named above without right or publication or republication, dissemination or disclosure except as expressly set forth or established by course of dealing. All rights are reserved. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or use of the contents of this facsimile is prohibited. If you received this transmission in error, please notify us immediately by telephone to arrange for return of the documents.

If you have any problems concerning this facsimile, please call (516) 742-4343 and ask for Christine Mogenis.

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 17136
Applicant(s): Hiroki Moriyama			
Application No. 10/690,404	Filing Date October 21, 2003	Examiner Matthew John Kasztejna	Group Art Unit 3739
Invention: ENDOSCOPE			
Confirmation No.: 5953			RECEIVED CENTRAL FAX CENTER MAY 22 2006
I hereby certify that this RESPONSE UNDER 37 C.F.R. 1.116 (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 571-273-8300) on May 22, 2006 (Date)			
Thomas Spinelli (Typed or Printed Name of Person Signing Certificate)  (Signature)			
Note: Each paper must have its own certificate of mailing.			

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 17136	
Applicant(s): Hiroki Moriyama						
Application No. 10/690,404	Filing Date October 21, 2003	Examiner Matthew John Kasztejna	Customer No. 23389	Group Art Unit 3739	Confirmation No. 5953	
Invention: ENDOSCOPE						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	17 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	2 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 _____ Signature			Dated: May 22, 2006			
Thomas Spinelli Registration No.: 39,533			<div style="border: 1px solid black; padding: 5px;"><p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____</p><p>_____ Signature of Person Mailing Correspondence</p><p>_____ Typed or Printed Name of Person Mailing Correspondence</p></div>			
CC:						

P11LARGE/REV09

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 17136	
Applicant(s): Hiroki Moriyama						
Application No. 10/690,404	Filing Date October 21, 2003	Examiner Matthew John Kasztejna	Customer No. 23389	Group Art Unit 3739	Confirmation No. 5953	
Invention: ENDOSCOPE						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	17 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	2 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<div style="display: flex; flex-direction: column; gap: 5px;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment.</div><div><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</div><div><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</div><div><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP<div style="margin-left: 20px;"><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div></div><div><input type="checkbox"/> Payment by credit card. Form PTO-2038.</div></div> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>						
 _____ Signature			Dated: May 22, 2006			
Thomas Spinelli Registration No.: 39,533			<div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 80%;">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence</div>			
CC:						

P11LARGE/REV09

**RECEIVED
CENTRAL FAX CENTER****MAY 22 2006****RESPONSE UNDER 37 C.F.R.
§ 1.116 EXPEDITED PROCEDURE
EXAMINING GROUP 3739****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant:	Hiroki Moriyama	Examiner:	Matthew John Kasztejna
Serial No:	10/690,404	Art Unit:	3739
Filed:	October 21, 2003	Docket:	17136
For:	ENDOSCOPE	Dated:	May 22, 2006
Conf. No.:	5953		

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE UNDER 37 C.F.R. § 1.116

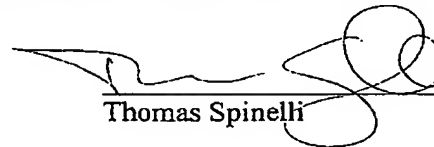
Sir:

In response to the Final Official Action dated February 22, 2006, Applicant respectfully requests reconsideration of the above-identified application in light of the following amendments and remarks:

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the U.S. Patent and Trademark Office on the date set for below.

Dated: May 22, 2006


Thomas Spinelli

g:\olympus\1494\17136\amend\17136.am2